

United States Bankruptcy Court Southern District of New York					Voluntary Petition				
Name of Debtor (if individual, enter Last, First, Middle): <b>Sweet N Sour 1167 Corp</b>					Name of Joint Debtor (Spouse) (Last, First, Middle):				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>20-1609385</b>					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):				
Street Address of Debtor (No. and Street, City, and State): <b>1167 2nd Avenue New York, NY</b> <div style="text-align: right; border: 1px solid black; padding: 2px;">ZIP CODE 10021</div>					Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; border: 1px solid black; padding: 2px;">ZIP CODE</div>				
County of Residence or of the Principal Place of Business: <b>New York</b>					County of Residence or of the Principal Place of Business:				
Mailing Address of Debtor (if different from street address): <div style="text-align: right; border: 1px solid black; padding: 2px;">ZIP CODE</div>					Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; border: 1px solid black; padding: 2px;">ZIP CODE</div>				
Location of Principal Assets of Business Debtor (if different from street address above): <div style="text-align: right; border: 1px solid black; padding: 2px;">ZIP CODE</div>									
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)			<b>Nature of Business</b> (Check one box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other  <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)  <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for <input type="checkbox"/> Chapter 9      Recognition of a Foreign <input checked="" type="checkbox"/> Chapter 11      Main Proceeding <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for <input type="checkbox"/> Chapter 13      Recognition of a Foreign Nonmain Proceeding  <hr/> <b>Nature of Debts</b> (Check one box.)  <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.			
<b>Filing Fee</b> (Check one box.)  <input checked="" type="checkbox"/> Full Filing Fee attached.  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					<b>Chapter 11 Debtors</b>  <b>Check one box:</b> <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).				
<b>Statistical/Administrative Information</b>  <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000									
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion									
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion									

THIS SPACE IS FOR  
COURT USE ONLY

FILED  
 BANKRUPTCY COURT  
 S.D. OF N.Y.  
 APR - 5 P 4: 05

**Voluntary Petition**

(This page must be completed and filed in every case.)

Name of Debtor(s):

Sweet N Sour 1167 Corp.

**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet.)Location  
Where Filed:

Case Number:

Date Filed:

Location  
Where Filed:

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet.)

Name of Debtor:

Case Number:

Date Filed:

District: Southern District of New York

Relationship:

Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X

Signature of Attorney for Debtor(s) (Date)

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box.)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes.)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

**Voluntary Petition**

(This page must be completed and filed in every case.)

Name of Debtor(s):

Sweet N Sour 1167 Corp.

**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X \_\_\_\_\_  
Signature of Debtor

X \_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Telephone Number (if not represented by attorney)

\_\_\_\_\_  
Date

**Signature of Attorney\***

X MMW  
Signature of Attorney for Debtor(s)  
Michael Musa-Obregon  
Printed Name of Attorney for Debtor(s)

Firm Name Musa-Obregon & Associates

Address 55-21 69th St.  
Maspeth, NY 11378

Telephone Number (718) 803-1000

Date 3/4/10

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X [Signature]  
Signature of Authorized Individual

Printed Name of Authorized Individual ABDUL RASHID

Title of Authorized Individual PRESIDENT

Date 3/30/10

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X \_\_\_\_\_  
(Signature of Foreign Representative)

\_\_\_\_\_  
(Printed Name of Foreign Representative)

\_\_\_\_\_  
Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

\_\_\_\_\_  
Address

X \_\_\_\_\_

\_\_\_\_\_  
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

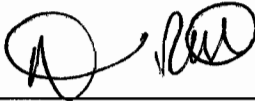
IN RE: Sweet N Sour Corp., Debtor

**Exhibit A**

The debtor is not required to register its securities under Section 12 of the Securities Exchange Act of 1934. The debtor is not publicly traded.

4/5/10  
Date

Sweet N Sour 1167 Corp.

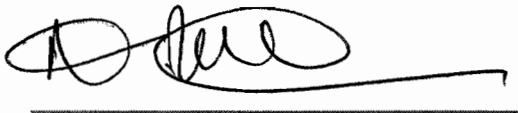
By:   
Abdul Rashid  
President, Sweet N Sour 1167 Corp.

WHEREAS, Sweet N Sour 1167 Corp. ("the Corporation") is insolvent and unable to pay its debts as they mature, and WHEREAS, it would be in the best interests of creditors for the Corporation to file a voluntary petition under Chapter 11 of the Bankruptcy Code, it is:

RESOLVED, that the Corporation file as soon as practicable a bankruptcy in accordance with Chapter 11 of the Bankruptcy Code.

The undersigned hereby certifies that he/she is the duly elected and qualified President and the custodian of the books and records and seal of Sweet N Sour 1167 Corp., a corporation duly formed pursuant to the laws of the state of New York and that the foregoing is a true record of a resolution duly adopted at a meeting of the sole officer/owner/shareholder of the corporation and that said meeting was held in accordance with state law and the Bylaws of the above-named Corporation on April 5, 2010 and that said resolution is now in full force and effect without modification or rescission.

IN WITNESS WHEREOF, I have executed my name as President and have hereunto affixed the corporate seal of the above-named Corporation this fifth day of April, 2010.



Abdul Rashid  
President  
Sweet N Sour 1167 Corp.




Harrington Realty Co. LLC.  
156A East 83<sup>rd</sup> Street  
New York, NY 10028

Sweet N Sour 1167 Corp.  
1167 2nd Avenue  
New York, NY 10021

Abdul Rashid  
President  
Sweet N Sour 1167 Corp.  
1167 2nd Avenue  
New York, NY 10021

I, Michael Musa-Obregon, the attorney for the Sweet N Sour 1167 Corp., the debtor/petitioner, hereby certify under the penalties of perjury that the above mailing matrix has been compared to and contains the names, addresses and zip codes of all persons and entities as they appear on the list of creditors or any amendment thereto filed herewith.

Dated: 4/5/10

  
\_\_\_\_\_  
Michael Musa-Obregon  
Musa-Obregon & Associates  
Attorney for Debtor/Petitioner  
Sweet N Sour 1167 Corp.

Harrington Realty Co. LLC.  
156A East 83<sup>rd</sup> Street  
New York, NY 10028

I, Michael Musa-Obregon, the attorney for the Sweet N Sour 1167 Corp., the debtor/petitioner, hereby certify under the penalties of perjury that the above mailing matrix has been compared to and contains the names, addresses and zip codes of all persons and entities as they appear on the list of creditors holding the twenty largest unsecured claims or any amendment thereto filed herewith.

Dated: 4/5/10



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Michael Musa-Obregon  
Musa-Obregon & Associates  
Attorney for Debtor/Petitioner  
Sweet N Sour 1167 Corp.

## UNITED STATES BANKRUPTCY COURT

In re Sweet N Sour 1167 Corp.  
Debtor

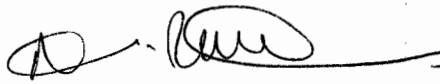
Case No. \_\_\_\_\_

Chapter \_\_\_\_\_

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed or subject to setoff	Amount of claim [if secured also state value of security]

Date: 3/30/10
  
 Debtor

[Declaration as in Form 2]



## **List of Creditors**

Harrington Realty Co. LLC.  
156A East 83<sup>rd</sup> Street  
New York, NY 10028

**List of Creditors Holding 20 Largest Unsecured Claims**

**Name:** Harrington Realty Co. LLC.

**Address:** 156A East 83<sup>rd</sup> Street, New York, NY 10028

**Agent:** Lon Paul Fischman, Esq.; (212) 274-0555; Fischman & Fischman, 335 Broadway, New York, NY 10013

**Nature of claim:** Real estate lease

**Claim is not contingent, unliquidated, disputed or subject to setoff**

**Amount of claim:** \$83,722.87

**UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

IN RE: Sweet N Sour Corp., Debtor

**CORPORATE OWNERSHIP STATEMENT**

Pursuant to Federal Rules of Bankruptcy Procedures 1007(a)(1) and 7007.1, the undersigned corporation, Sweet N Sour 1167 Corp., certifies that:

There are no entities to report under FRBP 1007(a)(1) or 7007.1.

The undersigned corporation further acknowledges its duty to file a supplemental statement promptly upon any change in circumstances that renders this Corporate Ownership Statement inaccurate.

4/5/10

\_\_\_\_\_  
Date

Sweet N Sour 1167 Corp.

By: \_\_\_\_\_

Abdul Rashid

President, Sweet N Sour 1167 Corp.

**SWEET & SOUR 1167 CORP**  
**Balance Sheet**  
**As of July 31, 2009**

	<u>Jul 31, 09</u>
<b>ASSETS</b>	
Current Assets	
Checking/Savings	
0102 · Bank of America A/C #961	207.89
0105 · Cash in Hand	5,336.95
Total Checking/Savings	<u>5,544.84</u>
Other Current Assets	
0130 · Inventory	24,567.00
0134 · Federal Prepaid Tax	875.00
Total Other Current Assets	<u>25,442.00</u>
Total Current Assets	<u>30,986.84</u>
Fixed Assets	
0155 · Ice Cream Machine Used	12,600.00
0156 · Ice Cream Machine	12,750.00
0158 · Computer Equipment	1,634.77
0162 · Leasehold Improvement	25,600.00
0175 · Accumulated Depreciation	-31,541.00
Total Fixed Assets	<u>21,043.77</u>
Other Assets	
0181 · Deposit Rent	25,500.00
0182 · Deposit Con Edison	800.00
0185 · Organization Cost	1,500.00
Total Other Assets	<u>27,800.00</u>
<b>TOTAL ASSETS</b>	<u><b>79,830.61</b></u>
<b>LIABILITIES &amp; EQUITY</b>	
Liabilities	
Current Liabilities	
Other Current Liabilities	
0222 · Account Payable	13,884.00
0224 · Fica & Fwt Tax	709.87
0225 · State W/H Tax	112.50
0228 · Accrued Expenses	4,500.00
0231 · State Sales Tax	3,207.50
0232 · NYS Corp Tax Payable	75.00
0233 · NYS Corp Tax Payable - Metro	13.00
0234 · NYC Corp Tax Payable	-84.00
0236 · Additional Sales Tax Payable	37,729.51
Total Other Current Liabilities	<u>60,147.38</u>
Total Current Liabilities	<u>60,147.38</u>
Long Term Liabilities	
0244 · Loan from Stockholders	20,430.00
Total Long Term Liabilities	<u>20,430.00</u>
Total Liabilities	<u>80,577.38</u>
Equity	
2810 · Capital Stock	78,615.00
3901 · Retained Earnings - 07/31/05	2,671.83
3902 · Retained Earnings - 07/31/06	4,431.71
3903 · Retained Earnings - 07/31/07	-31,727.62
3904 · Retained Earnings - 07/31/08	-25,333.93
Net Income	-29,403.76
Total Equity	<u>-746.77</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><b>79,830.61</b></u>

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10/14/09

Accrual Basis

## SWEET &amp; SOUR 1167 CORP

## Profit &amp; Loss

August 2008 through July 2009

	Aug '08 - Jul 09	% of Income
Ordinary Income/Expense		
Income		
0400 · Revenue	0.00	0.0%
0401 · Sales Taxable	188,342.67	84.0%
0402 · Sales Non Taxable	50,543.59	22.5%
0405 · Sales Tax Collected	-14,554.76	-6.5%
Total Income	224,331.50	100.0%
Cost of Goods Sold		
0502 · Opening Inventory	23,471.00	10.5%
0505 · Purchases	67,642.18	30.2%
0508 · Ending Inventory	-24,567.00	-11.0%
Total COGS	66,546.18	29.7%
Gross Profit	157,785.32	70.3%
Expense		
0603 · Wages - Officers	15,900.00	7.1%
0604 · Wages - Others	30,316.00	13.5%
0605 · Repairs & Maintenance	92.00	0.0%
0606 · Rent	95,663.46	42.6%
0611 · Royalty	3,594.34	1.6%
0615 · Interest Expense	1,896.49	0.8%
0616 · Insurance	2,958.43	1.3%
0620 · Licenses and Permits	200.00	0.1%
0622 · Printing & Stationary	207.16	0.1%
0625 · Depreciation	5,150.00	2.3%
0633 · Legal and Professional Fees	1,500.00	0.7%
0640 · Telephone	1,196.82	0.5%
0641 · Utilities	20,733.27	9.2%
0642 · Garbage Pickup	496.10	0.2%
0644 · Bank Service Charges	1,152.24	0.5%
0645 · Credit Cards Discount	1,585.61	0.7%
0650 · Fines & Penalties	340.00	0.2%
0700 · Taxes		
0707 · FICA	3,535.45	1.6%
0708 · SUTA	778.06	0.3%
0709 · FUTA	227.49	0.1%
0712 · NYS Corp Tax	75.00	0.0%
0713 · NYS Corp Tax - Metro	13.00	0.0%
0714 · NYC Corp Tax	300.00	0.1%
Total 0700 · Taxes	4,929.00	2.2%
Total Expense	187,910.92	83.8%
Net Ordinary Income	-30,125.60	-13.4%
Other Income/Expense		
Other Income		
0800 · Sales Tax Discount	721.84	0.3%
Total Other Income	721.84	0.3%
Net Other Income	721.84	0.3%
Net Income	-29,403.76	-13.1%

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10/14/09

Accrual Basis

## SWEET &amp; SOUR 1167 CORP

## Trial Balance

As of July 31, 2009

	Jul 31, 09	
	Debit	Credit
0102 · Bank of America A/C #961	207.89	
0105 · Cash in Hand	5,336.95	
0130 · Inventory	24,567.00	
0134 · Federal Prepaid Tax	875.00	
0155 · Ice Cream Machine Used	12,600.00	
0156 · Ice Cream Machine	12,750.00	
0158 · Computer Equipment	1,634.77	
0162 · Leasehold Improvement	25,600.00	
0175 · Accumulated Depreciation		31,541.00
0181 · Deposit Rent	25,500.00	
0182 · Deposit Con Edison	800.00	
0185 · Organization Cost	1,500.00	
0222 · Account Payable		13,884.00
0224 · Fica & Fwt Tax		709.87
0225 · State W/H Tax		112.50
0226 · FUTA Payable	0.00	
0227 · SUTA Payable	0.00	
0228 · Accrued Expenses		4,500.00
0230 · Salaries Payable	0.00	
0231 · State Sales Tax		3,207.50
0232 · NYS Corp Tax Payable		75.00
0233 · NYS Corp Tax Payable - Metro		13.00
0234 · NYC Corp Tax Payable	84.00	
0236 · Additional Sales Tax Payable		37,729.51
0244 · Loan from Stockholders		20,430.00
2810 · Capital Stock		78,615.00
3901 · Retained Earnings - 07/31/05		2,671.83
3902 · Retained Earnings - 07/31/06		4,431.71
3903 · Retained Earnings - 07/31/07	31,727.62	
3904 · Retained Earnings - 07/31/08	25,333.93	
0400 · Revenue	0.00	
0401 · Sales Taxable		188,342.67
0402 · Sales Non Taxable		50,543.59
0405 · Sales Tax Collected	14,554.76	
0502 · Opening Inventory	23,471.00	
0505 · Purchases	67,642.18	
0508 · Ending Inventory		24,567.00
0603 · Wages - Officers	15,900.00	
0604 · Wages - Others	30,316.00	
0605 · Repairs & Maintenance	92.00	
0606 · Rent	95,663.46	
0611 · Royalty	3,594.34	
0615 · Interest Expense	1,896.49	
0616 · Insurance	2,958.43	
0620 · Licenses and Permits	200.00	
0622 · Printing & Stationary	207.16	
0625 · Depreciation	5,150.00	
0633 · Legal and Professional Fees	1,500.00	
0640 · Telephone	1,196.82	
0641 · Utilities	20,733.27	
0642 · Garbage Pickup	496.10	
0644 · Bank Service Charges	1,152.24	
0645 · Credit Cards Discount	1,585.61	
0650 · Fines & Penalties	340.00	
0700 · Taxes:0707 · FICA	3,535.45	
0700 · Taxes:0708 · SUTA	778.06	
0700 · Taxes:0709 · FUTA	227.49	
0700 · Taxes:0712 · NYS Corp Tax	75.00	
0700 · Taxes:0713 · NYS Corp Tax - Metro	13.00	
0700 · Taxes:0714 · NYC Corp Tax	300.00	
0800 · Sales Tax Discount		721.84
TOTAL	462,096.02	462,096.02

**SWEET & SOUR 1167 CORP****Reconciliation Summary****0102 · Bank of America A/C #961, Period Ending 07/31/09**

	<b>31-Jul-2009</b>
Beginning Balance	491.72
Deposits & Credits	202,719.61
Checks & Payments	(200,604.53)
Bank Balance	<u><u>2,606.80</u></u>

Date	Check #	Amount
07/29/09	2281	1,845.68
07/29/09	2282	553.23

<b>Total O/S Checks</b>	<b>2,398.91</b>
<b>Book Balance</b>	<b>207.89</b>

**Credits**

Date	Amount
08/31/08	10,099.08
09/30/08	18,651.98
10/31/08	15,617.61
11/30/08	13,267.97
12/31/08	29,041.09
01/31/09	15,330.78
02/28/09	13,241.49
03/31/09	15,346.16
04/30/09	16,212.70
05/31/09	15,248.00
06/30/09	21,532.34
07/31/09	19,130.41
<b>Total</b>	<b>202,719.61</b>

**Debits**

Date	Amount
08/31/08	13,906.45
09/30/08	9,749.85
10/31/08	17,283.22
11/30/08	16,338.78
12/31/08	29,088.55
01/31/09	9,087.55
02/28/09	20,345.08
03/31/09	13,802.43
04/30/09	15,296.36
05/31/09	16,991.52
06/30/09	21,281.28
07/31/09	17,433.46
<b>Total</b>	<b>200,604.53</b>

**2008 Corporation Income Tax Return**  
prepared for:

**SWEET N SOUR 1167 CORP.**  
1167 2ND AVENUE  
NEW YORK, NY 10021

**ACCU BUSINESS CONSULTANTS INC.**  
1270 BROADWAY SUITE 908  
NEW YORK, NY 10001-3223



**ACCU BUSINESS CONSULTANTS INC.**  
**1270 BROADWAY SUITE 908**  
**NEW YORK, NY 10001-3223**  
**(212) 684-6440**  
**accu@accubusiness.com**

October 14, 2009

SWEET N SOUR 1167 CORP.  
1167 2ND AVENUE  
NEW YORK, NY 10021

Dear Client,

Enclosed is the 2008 Form 1120, U.S. Corporation Income Tax Return, for SWEET N SOUR 1167 CORP. for the tax year ending July 31, 2009.

Your 2008 Form 1120, U.S. Corporation Income Tax Return, has been electronically filed.

No payment is due with this return.

Enclosed is the 2008 Form CT-4, New York State General Business Corporation Tax Return for SWEET N SOUR 1167 CORP..

Your New York State General Business Corporation Tax Return has been electronically filed.

Your balance due of \$88.00 will be automatically withdrawn from your Checking Account on 10/14/2009.

Enclosed is the 2008 Form NYC-4S, New York City General Corporation Tax Return for SWEET N SOUR 1167 CORP..

The return should be signed and dated by a corporate officer and mailed on or before October 15, 2009 to:

NYC Department of Finance  
General Corporation Tax  
P.O. Box 5060  
Kingston, NY 12402-5060

No payment is required. The overpayment of \$84 will be applied to next year's estimated tax.  
Kingston, NY 12402-5080

We have prepared your income tax returns based on the information you have provided to us. Please make sure before signing and filing these tax returns that these tax returns are true,

complete and include all income and deductions and there are no omission and misstatements. Please make sure that you have all supporting and backup documents, it is required by law to keep these supporting and backup documents for a period of three years from the date of filing or due date whichever is later. We suggest that you keep these supporting and backup documents for a period of five years from the date of filing or due date whichever is later.

We very much appreciate the opportunity to serve you. If you have any questions regarding this return, please do not hesitate to call.

Sincerely,

ACCU BUSINESS CONSULTANTS INC.

► See separate instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instructions)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Signature of officer _____			Date _____	<b>PRESIDENT</b> Title _____	
<b>Paid Preparer's Use Only</b>	Preparer's signature	Date <b>10/14/09</b>	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN <b>P00380474</b>		
	Firm's name (or yours if self-employed), address, and ZIP code <b>ACCU BUSINESS CONSULTANTS INC.</b> <b>1270 BROADWAY SUITE 908</b> <b>NEW YORK NY 10001-3223</b>			EIN <b>11-3355161</b> Phone no. <b>(212) 684-6440</b>		

**Schedule A Cost of Goods Sold** (see instructions)

1	Inventory at beginning of year	1	23,471.
2	Purchases	2	67,642.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	<b>Total.</b> Add lines 1 through 5	6	91,113.
7	Inventory at end of year	7	24,567.
8	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and on page 1, line 2	8	66,546.

9a Check all methods used for valuing closing inventory:

(i) ☒ Cost(ii) ☐ Lower of cost or market(iii) ☐ Other (Specify method used and attach explanation.)

b Check if there was a writedown of subnormal goods

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)

d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO

9d

e If property is produced or acquired for resale, do the rules of section 263A apply to the corporation?

☐ Yes☒ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If 'Yes,' attach explanation

☐ Yes☒ No**Schedule C Dividends and Special Deductions** (see instructions)

	(a) Dividends received	(b) Percentage	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)	70	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)	80	
3	Dividends on debt-financed stock of domestic and foreign corporations		
4	Dividends on certain preferred stock of less-than-20%-owned public utilities	42	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities	48	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs	70	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs	80	
8	Dividends from wholly owned foreign subsidiaries	100	
9	<b>Total.</b> Add lines 1 through 8. See instructions for limitation		
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958	100	
11	Dividends from affiliated group members	100	
12	Dividends from certain FSCs	100	
13	Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12		
14	Income from controlled foreign corporations under subpart F (attach Form(s) 5471)		
15	Foreign dividend gross-up		
16	IC-DISC and former DISC dividends not included on lines 1, 2, or 3		
17	Other dividends		
18	Deduction for dividends paid on certain preferred stock of public utilities		
19	<b>Total dividends.</b> Add lines 1 through 17. Enter here and on page 1, line 4		
20	<b>Total special deductions.</b> Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b		

**Schedule E Compensation of Officers** (see instructions for page 1, line 12)**Note:** Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1) are \$500,000 or more.

1	(a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of corporation stock owned		(f) Amount of compensation
				(d) Common	(e) Preferred	
			%	%	%	
			%	%	%	
			%	%	%	
			%	%	%	
			%	%	%	
2	<b>Total compensation of officers</b>					
3	<b>Compensation of officers claimed on Schedule A and elsewhere on return</b>					
4	<b>Subtract line 3 from line 2. Enter the result here and on page 1, line 12</b>					

Form 1120 (2008)

**Schedule K** Continued

5 At the end of the tax year, did the corporation:

Yes No

a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851, Affiliations Schedule? For rules of constructive ownership see instructions

X

If 'Yes,' complete (i) through (iv)

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership see instructions

X

If 'Yes,' complete (i) through (iv)

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)

X

If 'Yes,' file Form 5452, Corporate Report of Nondividend Distributions.

If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary

7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock?

X

For rules of attribution see section 318. If 'Yes,' enter:

(i) Percentage owned ▶ and (ii) Owner's country ▶

(c) The corporation may have to file Form 5472, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶

8 Check this box if the corporation issued publicly offered debt instruments with original issue discount ☐

If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.

9 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$

10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ 2

11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here ☐

If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.

12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction on line 29a) ▶ \$ 56,720.

13 Are the corporation's total receipts (line 1a plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000?

X

If 'Yes,' the corporation is not required to complete Schedules L, M-1, and M-2 on page 5. Instead, enter the total amount of cash distributions and the book value property distributions (other than cash) made during the tax year. ▶ \$

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1 Cash .....			9,846.		5,545.
2a Trade notes and accounts receivable .....					
b Less allowance for bad debts .....					
3 Inventories .....			23,471.		24,567.
4 U.S. government obligations .....					
5 Tax-exempt securities (see instructions) .....					
6 Other current assets (attach schedule) .. Ln. 6. Stmt			1,684.		875.
7 Loans to shareholders .....					
8 Mortgage and real estate loans .....					
9 Other investments (attach schedule) .....					
10a Buildings and other depreciable assets .....	50,950.			52,585.	
b Less accumulated depreciation .....	26,391.		24,559.	31,541.	21,044.
11a Depletable assets .....					
b Less accumulated depletion .....					
12 Land (net of any amortization) .....					
13a Intangible assets (amortizable only) .....					
b Less accumulated amortization .....					
14 Other assets (attach schedule) .. Ln. 14. Stmt			27,800.		27,800.
15 Total assets .....			87,360.		79,831.
<b>Liabilities and Shareholders' Equity</b>					
16 Accounts payable .....			8,762.		13,884.
17 Mortgages, notes, bonds payable in less than 1 year .....					
18 Other current liabilities (attach sch) .. Ln. 18. Stmt			49,941.		46,264.
19 Loans from shareholders .....					20,430.
20 Mortgages, notes, bonds payable in 1 year or more .....					
21 Other liabilities (attach schedule) .....					
22 Capital stock: a Preferred stock .....					
b Common stock .....	78,615.		78,615.	78,615.	78,615.
23 Additional paid-in capital .....					
24 Retained earnings — Approp (att sch) .....					
25 Retained earnings — Unappropriated .....			-49,958.		-79,362.
26 Adjmnt to shareholders' equity (att sch) .....					
27 Less cost of treasury stock .....					
28 Total liabilities and shareholders' equity .....			87,360.		79,831.

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return**

Note: Schedule M-3 required instead of Schedule M-1 if total assets are \$10 million or more — see instructions

1 Net income (loss) per books .....	-29,404.	7 Income recorded on books this year not included on this return (itemize):	
2 Federal income tax per books .....	0.	Tax-exempt interest \$ .....	
3 Excess of capital losses over capital gains .....			
4 Income subject to tax not recorded on books this year (itemize):			
5 Expenses recorded on books this year not deducted on this return (itemize):		8 Deductions on this return not charged against book income this year (itemize):	
a Depreciation .....	\$ .....	a Depreciation .. \$ .....	
b Charitable contributions .. \$ .....		b Charitable contribns \$ .....	
c Travel & entertainment .. \$ .....			
See Ln 5 Stmt .....	340.		
	340.	9 Add lines 7 and 8 .....	
6 Add lines 1 through 5 .....	-29,064.	10 Income (page 1, line 28) — line 6 less line 9 .....	-29,064.

**Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)**

1 Balance at beginning of year .....	-49,958.	5 Distributions .....	a Cash ..	
2 Net income (loss) per books .....	-29,404.	b Stock .....	c Property ..	
3 Other increases (itemize):		6 Other decreases (itemize):		
		7 Add lines 5 and 6 .....		
4 Add lines 1, 2, and 3 .....	-79,362.	8 Balance at end of year (line 4 less line 7) .....		-79,362.

Form 4562

Department of the Treasury  
Internal Revenue Service (99)Depreciation and Amortization  
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2008

Attachment  
Sequence No. 67

Name(s) shown on return

SWEET N SOUR 1167 CORP.

Identifying number

20-1609385

Business or activity to which this form relates

Form 1120 Line 20

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	4,823.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B — Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1,635.	5.0 yrs	HY	200DB	327.
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	

**Section C — Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life				S/L	
b 12-year		12 yrs		S/L	
c 40-year		40 yrs	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	5,150.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDI20812 06/12/08

Form 4562 (2008)

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A — Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? .....				Yes		No		24b If 'Yes,' is the evidence written? .....				Yes		No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost							
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .....							25								
26 Property used more than 50% in a qualified business use:															
27 Property used 50% or less in a qualified business use:															
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....							28								
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....								29							

**Section B — Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles) .....												
31 Total commuting miles driven during the year .....												
32 Total other personal (noncommuting) miles driven .....												
33 Total miles driven during the year. Add lines 30 through 32 .....												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours? .....												
35 Was the vehicle used primarily by a more than 5% owner or related person? .....												
36 Is another vehicle available for personal use? .....												

**Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
39 Do you treat all use of vehicles by employees as personal use? .....		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year (see instructions):					
43 Amortization of costs that began before your 2008 tax year .....					43
44 Total. Add amounts in column (f). See the instructions for where to report .....					44



Form 1120, Page 1, Line 10  
Other Income Statement

<u>SALES TAX VENDOR COLLECTION CREDIT</u>	<u>722.</u>
Total	<u>722.</u>

Form 1120, Page 1, Line 26  
Other Deductions Statement

<u>BANK CHARGES</u>	<u>1,152.</u>
<u>INSURANCE</u>	<u>2,959.</u>
<u>LEGAL AND PROFESSIONAL</u>	<u>1,500.</u>
<u>PERMITS AND FEES</u>	<u>200.</u>
<u>PRINTING</u>	<u>207.</u>
<u>TELEPHONE</u>	<u>1,197.</u>
<u>UTILITIES</u>	<u>20,733.</u>
<u>GARBAGE PICKUP</u>	<u>496.</u>
<u>CREDIT CARDS DISCOUNT</u>	<u>1,586.</u>
<u>ROYALTY</u>	<u>3,594.</u>
Total	<u>33,624.</u>

Form 1120, Page 4, Schedule L, Line 6  
Ln 6 Stmt

Other Current Assets:	Beginning of tax year	End of tax year
<u>Federal Overpaid Corporation Income tax</u>	<u>1,684.</u>	<u>875.</u>
Total	<u>1,684.</u>	<u>875.</u>

Form 1120, Page 4, Schedule L, Line 14  
Ln 14 Stmt

Other Assets:	Beginning of tax year	End of tax year
<u>Deposit Rent</u>	<u>25,500.</u>	<u>25,500.</u>
<u>Deposit Utilities</u>	<u>800.</u>	<u>800.</u>
<u>Organization Cost</u>	<u>1,500.</u>	<u>1,500.</u>
Total	<u>27,800.</u>	<u>27,800.</u>

Form 1120, Page 4, Schedule L, Line 18  
Ln 18 Stmt

Other Current Liabilities:	Beginning of tax year	End of tax year
<u>Payroll Taxes Payable</u>	<u>860.</u>	<u>823.</u>
<u>Accrued Expenses</u>	<u>3,000.</u>	<u>4,500.</u>
<u>Sales Tax Payable</u>	<u>46,164.</u>	<u>40,937.</u>
<u>Corporation Taxes Payable</u>	<u>-83.</u>	<u>4.</u>

Form 1120, Page 4, Schedule L, Line 18  
Ln 18 Stmt

Continued

Other Current Liabilities:	Beginning of tax year	End of tax year
Total	<u>49,941.</u>	<u>46,264.</u>

Form 1120, Page 4, Schedule M-1, Line 5  
Ln 5 Stmt

Penalties and fines	<u>340.</u>
Total	<u>340.</u>

General Business Corporation Franchise  
Tax Return Short Form

Tax Law — Article 9-A

All filers must enter tax period:

Final return ☒ Amended return ☐  
(see the instructions)beginning ☒ 08-01-08 ending ☒ 07-31-09

Employer identification number File number Business telephone number

☒ 20-1609385 ☒ AA9 212-308-0618If you claim an  
overpayment, mark  
an X in the box . . . . .

Legal name of corporation

SWEET N SOUR 1167 CORP.

Trade name/DBA

Mailing name (if different from legal name above)

c/o

Number and street or PO box

1167 2ND AVENUE

City

NEW YORK

State ZIP code

NY 10021

State or country of  
incorporation

NY

Date of incorporation

08-16-04

Foreign corporations: date  
began business in NYS

Date received (for Tax Department use only)

NAICS business code no. (from federal return)

☒ 445292If address  
above is new,  
mark an  
X in box . . . . . ☒If your name, employer identification number, address,  
or owner/officer information has changed, you must file  
Form DTF-95. If only your address has changed, you may  
file Form DTF-96. You can get these forms from our Web  
site, by fax or by phone. See *Need help?* in the insts.

Audit (for Tax Department use only)

Principal business  
activity

RETAIL NUTS, CANDY &amp; ICE CREAM

See Form CT-3/4-I, *Instructions for Forms CT-4, CT-3, and CT-3-ATT*, before completing this return.

## Metropolitan transportation business tax (MTA surcharge)

During the tax year did you do business, employ capital, own or lease property, or maintain an office in the Metropolitan Commuter Transportation District (MCTD)? If Yes, you must file Form CT-3M/4M. The MCTD includes the counties of New York, Bronx, Kings, Queens, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk, and Westchester. (mark an X in the appropriate box)

Yes ☒ No ☐

Payment enclosed

A. Pay amount shown on line 43. Make check payable to: **New York State Corporation Tax**

✦ Attach your payment here. Detach all check stubs. (See instructions for details.)

☒ A.

75.

B. Federal return filed (you must mark an X in one): Attach a complete copy of your federal return.

Form 1120 ☒ Form 1120-H ☐ Other: ☐Consolidated basis ☐ Form 1120S ☐C. If you included a qualified subchapter S subsidiary (QSSS) in this return, mark an X in the box and attach Form CT-60-QSSS ☐D. Have you underreported your tax due on past returns? To correct without penalty, visit us at [www.nystax.gov](http://www.nystax.gov).E. Did the entity have an interest in real property located in New York State during the last 3 years?  
(mark an X in the appropriate box)Yes ☐ No ☒F. Has there been a transfer or acquisition of controlling interest in the entity during the last 3 years?  
(mark an X in the appropriate box)Yes ☐ No ☒

(continued)

SWEET N SOUR 1167 CORP.

20-1609385

**Computation of entire net income (ENI) base** (see instructions)

1	Federal taxable income (FTI) before net operating loss (NOL) & special deductions	• 1.	-29,064.
2	Interest on federal, state, municipal, and other obligations not included on line 1 (see instrs)	• 2.	
3	Interest paid to a corporate stockholder owning more than 50% of issued and outstanding stock	• 3.	
4	New York State and other state and local taxes deducted on your federal return (see instrs)	• 4.	88.
5	Federal depreciation from Form CT-399, if applicable (see instructions)	• 5.	
6	Add lines 1 through 5	• 6.	-28,976.
7	New York net operating loss deduction (NOLD) (attach federal & New York State computations)	• 7.	
8	Allowable New York State depreciation from Form CT-399, if applicable (see instructions)	• 8.	
9	Refund or credit of certain taxes (see instructions)	• 9.	
10	Total subtractions (add lines 7 through 9)	• 10.	
11	ENI base (subtract line 10 from line 6; show loss with a minus (-) sign; enter here and on line 21)	• 11.	-28,976.
12	ENI base tax (multiply line 11 by the appropriate rate from the Tax rates schedule in the Form CT-3/4-I instructions; enter here and on line 28)	• 12.	0.

**Computation of capital base** (enter whole dollars for lines 13 through 18; see instructions)

	A Beginning of year	B End of year	C Average value
13 Total assets from federal return . . . . *	87,360 . *	79,831 . *	83,596 .
14 Real property and marketable securities included on line 13 . . . . .			
15 Subtract line 14 from line 13 . . . . .	87,360 .	79,831 . *	83,596 .
16 Real property and marketable securities at fair market value . . . . .			
17 Adjusted total assets (add lines 15 and 16) . . . . .	87,360 .	79,831 . *	83,596 .
18 Total liabilities . . . . .	58,703 .	80,578 . *	69,641 .
19 Capital base (subtract line 18, column C, from line 17, column C) . . . . . * 19.			13,955 .
20 Capital base tax (see instructions) . . . . . * 20.			21 .

**Computation of minimum taxable income (MTI) base**

21	ENI base from line 11	• 21.	-28,976.
22	Depreciation of tangible property placed in service after 1986 (see instructions)	• 22.	0.
23	New York NOLD from line 7	• 23.	
24	Total (add lines 21 through 23)	• 24.	-28,976.
25	Alternative net operating loss deduction (ANOLD) (see instrs)	• 25.	
26	MTI base (subtract line 25 from line 24)	• 26.	-28,976.
27	Tax on MTI base (multiply line 26 by 1.5% (.015); see instructions)	• 27.	0.

SWEET N SOUR 1167 CORP.

20-1609385

## Computation of tax

28	Tax on ENI base from line 12	• 28.	0.
29	Tax on capital base from line 20 (see instructions)		
	New small business: First year • Second year •	• 29.	21.
30	Fixed dollar minimum tax (See Table 7 in the Tax rates schedule in the Form CT-3/4-I instructions. You must enter an amount on line 31; see instructions)	• 30.	75.
31	New York receipts (see instructions)	• 31.	225,053.
32	Tax due (amount from line 27, 28, 29, or 30, whichever is largest; see instructions for exception)	• 32.	75.

## First installment of estimated tax for next period:

33a	If you filed a request for extension, enter amount from Form CT-5, line 2	• 33a.	
33b	If you did not file Form CT-5 and line 32 is over \$1,000, see instructions	• 33b.	
34	Add line 32 and line 33a or 33b	34.	75.
35	Total prepayments from line 54	• 35.	
36	Balance (subtract line 35 from line 34; if line 35 is more than line 34, enter 0)	36.	75.
37	Estimated tax penalty (see instructions; mark an X in the box if Form CT-222 is attached)	• 37.	0.
38	Interest on late payment (see instructions)	• 38.	
39	Late filing and late payment penalties (see instructions)	• 39.	
40	Balance (add lines 36 through 39)	40.	75.

## Voluntary gifts/contributions (see instructions):

41a	Amount for Return a Gift to Wildlife	• 41a.	
41b	Amount for Breast Cancer Research and Education Fund	• 41b.	
41c	Amount for Prostate Cancer Research, Detection, and Education Fund	• 41c.	
41d	Amount for National 9/11 Memorial	• 41d.	
42	Total (add lines 34, 37, 38, 39, and 41a through 41d)	42.	75.
43	Balance due (if line 35 is less than line 42, subtract line 35 from line 42 and enter here. This is the amount due; enter the payment amount on line A on page 1)	• 43.	75.
44	Overpayment (if line 35 is more than line 42, subtract line 42 from line 35. This is your overpayment; enter here and see instructions)	44.	0.
45	Amount of overpayment to be credited to next period	• 45.	
46	Balance of overpayment (subtract line 45 from line 44)	• 46.	0.
47	Amount of overpayment to be credited to Form CT-3M/4M	• 47.	
48	Refund of overpayment (subtract line 47 from line 46)	• 48.	0.

## Composition of prepayments on line 35 (see instructions)

	Date paid	Amount
49	Mandatory first installment	49. 10-15-08 0.
50a	Second installment from Form CT-400	50a.
50b	Third installment from Form CT-400	50b.
50c	Fourth installment from Form CT-400	50c.
51	Payment with extension request from Form CT-5, line 5	51.
52	Overpayment credited from prior years	Period 52.
53	Overpayment credited from Form CT-3M/4M	Period 53.
54	Total prepayments (add lines 49 through 53; enter here and on line 35)	54. 0.

### Interest paid to shareholders

- 55 Did this corporation make any payments treated as interest in the computation of ENI to shareholders owning directly or indirectly, individually or in the aggregate, more than 50% of the corporation's issued and outstanding capital stock? (mark an X in the appropriate box) If Yes, complete the following and lines 56 through 59 attach additional sheets if necessary
- | Shareholder's name   | SSN or EIN | 55. | Yes <input type="radio"/> | No <input type="radio"/> |
|--|------------|-----|---------------------------|--------------------------|
| 56 Interest paid to shareholder  |            | 56. |                           |                          |
| 57 Total indebtedness to shareholder described above                                 |            | 57. |                           |                          |
| 58 Total interest paid   |            | 58. |                           |                          |
| 59 Is there written evidence of the indebtedness? (mark an X in the appropriate box) |            | 59. | Yes <input type="radio"/> | No <input type="radio"/> |

### Corporations organized outside New York State only

#### Capital stock issued and outstanding:

- |  | Value   |
|--|---|
| 60 Number of par shares  | \$  |
| 61 Number of no-par shares   | \$  |
| 62 Total receipts entered on your federal return   | 225,053.  |
| 63 Interest deducted in computing FTI (see instructions)   | 1,897.  |
| 64 Depreciable assets and land entered on your federal return  | 21,044.   |
| 65 If the Internal Revenue Service (IRS) has completed an audit of any of your returns within the last five years, list years:   |   |
| 66 If you are a member of an affiliated federal group, enter primary corporation name and EIN:   | EIN   |
| 67 If you are more than 50% owned by another corporation, enter parent corporation name and EIN:   | EIN   |
| 68 Are you claiming small business taxpayer status for lower ENI tax rates? (see Small business taxpayer definition in the Form CT-3/4-I instrs; mark an X in appropriate box) | Yes <input type="radio"/> X No <input type="radio"/>            |
| 69 If you marked Yes on line 68, enter total capital contributions (see worksheet in instructions)   | 78,615.   |
| 70 Are you claiming qualified New York manufacturer status for lower capital base tax limitation? (see instructions; mark an X in the appropriate box)                         | Yes <input type="radio"/> No <input checked="" type="radio"/> X |
| 71 Are you claiming qualified New York manufacturer status for lower ENI tax rates? (see instructions; mark an X in the appropriate box)                                       | Yes <input type="radio"/> No <input checked="" type="radio"/> X |

Third-party Yes No

designee Designee's name Designee's phone number PIN  
(see instrs) Designee's e-mail address

**Certification:** I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

**Authorized person** Signature of authorized person Official title **PRESIDENT**

E-mail address of authorized person Date

**Paid** Firm's name (or yours if self-employed)

**preparer** **ACCU BUSINESS CONSULTANTS INC.**

ID number 11-3355161

**use** Signature of individual preparing this return

**only**

Address 1270 BROADWAY SUITE 908  
City NEW YORK

State NY ZIP code 10001-3223 Date 10-14-09

E-mail address of individual preparing this return **accu@accubusiness.com**

See instructions for where to file.

2008

CT-3M/4M

Staple forms here

New York State Department of Taxation and Finance

General Business Corporation  
MTA Surcharge Return

Tax Law — Article 9-A, Section 209-B

All filers must enter tax period:

Amended return ☐beginning ☐ 08-01-08 ending ☐ 07-31-09

Employer identification number

File number

Business telephone number

☐ 20-1609385☐ AA9

212-308-0618

If you claim an  
overpayment, mark  
an X in the box

Legal name of corporation

Trade name/DBA

SWEET N SOUR 1167 CORP.

Mailing name (if different from legal name)

State or country of incorporation

Date received (for Tax Dept use only)

c/o

NY

Number and street/PO box

Date of incorporation

1167 2ND AVENUE

08-16-04

City

State ZIP code

Foreign corporations: date began  
business in NYS

NEW YORK

NY 10021

If your name, employer identification number, address, or owner/officer information has changed, you must file Form DTF-95. If only your address has changed, you may file Form DTF-96. You can get these forms from our Web site, by fax, or by phone. See *Need help?* in the instructions.

If you do business, employ capital, own or lease property, or maintain an office in the Metropolitan Commuter Transportation District (MCTD), you must file this form. If not, you do not have to file this form. However, you must disclaim liability for the MTA surcharge on Form CT-3, CT-3-A, or CT-4. The MCTD includes the counties of New York, Bronx, Kings, Queens, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk, and Westchester.

A Pay amount shown on line 12. Make check payable to: *New York State Corporation Tax*

Payment enclosed

Attach your payment here. Detach all check stubs. (See instructions for details.)

☐ A.

13.

## Computation of MTA surcharge

1	Net New York State franchise tax (see Form CT-3M/4M-I, Instructions for Form CT-3M/4M)	<input type="checkbox"/> 1.	75.
2	MCTD allocation percentage from line 35, line 43, or line 45	<input type="checkbox"/> 2.	100.0000 %
3	Allocated franchise tax (multiply line 1 by line 2)	<input type="checkbox"/> 3.	75.
4	MTA surcharge (multiply line 3 by 17% (.17))	<input type="checkbox"/> 4.	13.

## First installment of estimated tax for next period:

5a	If you filed a request for extension, enter amount from Form CT-5, line 7, or CT-5.3, line 10	<input type="checkbox"/> 5a.	
5b	If you did not file Form CT-5 or CT-5.3, see instructions	<input type="checkbox"/> 5b.	0.
6	Add lines 4 and line 5a or 5b	<input type="checkbox"/> 6.	13.
7	Total prepayments from line 52	<input type="checkbox"/> 7.	0.
8	Balance (if line 7 is less than line 6, subtract line 7 from line 6)	<input type="checkbox"/> 8.	13.
9	Estimated tax penalty (see instrs; mark an X in the box if Form CT-222 is attached)	<input type="checkbox"/> 9.	0.
10	Interest on late payment (see instructions for Form CT-3, CT-3-A, or CT-4)	<input type="checkbox"/> 10.	
11	Late filing and late payment penalties (see instructions for Form CT-3, CT-3-A, or CT-4)	<input type="checkbox"/> 11.	
12	Balance due (add lines 8 through 11 and enter here; enter the payment amount on line A above)	<input type="checkbox"/> 12.	13.
13	Overpayment (if line 6 is less than line 7, subtract line 6 from line 7; enter here and see instructions)	<input type="checkbox"/> 13.	
14	Amount of overpayment to be credited to New York State franchise tax	<input type="checkbox"/> 14.	
15	Amount of overpayment to be credited to MTA surcharge for next period	<input type="checkbox"/> 15.	
16	Amount of overpayment to be refunded	<input type="checkbox"/> 16.	

## Schedule A — Computation of MCTD allocation percentage

## Schedule A, Part 1 — MCTD allocation (see instructions)

Average value of property (see instructions)

A  
MCTDB  
New York State

17	Real estate owned	17.
18	Real estate rented	18.
19	Inventories owned	19.
20	Tangible personal property owned	20.
21	Tangible personal property rented	21.
22	Total (add lines 17 through 21)	22.

23 MCTD property factor (divide line 22, column A, by line 22, column B)

23.

%

NYCA0912 11/07/08

(continued)

43901081030

SWEET N SOUR 1167 CORP.

20-1609385

## Receipts in the regular course of business from:

- 24 Sales of tangible personal property allocated to the MCTD ..... 24.
- 25 Sales of tangible personal property allocated to New York State ..... 25.
- 26 Services performed ..... 26.
- 27 Rentals of property ..... 27.
- 28 Royalties ..... 28.
- 29 Other business receipts ..... 29.
- 30 Total (add lines 24 through 29) ..... • 30.
- 31 MCTD receipts factor (divide line 30, column A, by line 30, column B) ..... • 31. %
- 32 Payroll – Wages and other compensation of employees except general executive officers ..... • 32.
- 33 MCTD payroll factor (divide line 32, column A, by line 32, column B) ..... • 33. %
- 34 Total MCTD factors (add lines 23, 31, and 33) ..... 34. %
- 35 MCTD allocation percentage (divide line 34 by three or by the number of factors; enter here and on line 2) ..... • 35. %

## Schedule A, Part 2 – Computation of MCTD allocation for aviation corporations (see instructions)

- |   | A<br>MCTD | B<br>New York State |
|---|-----------|---------------------|
| 36 Revenue aircraft arrivals and departures ..... • 36.                                       |           |                     |
| 37 MCTD percentage (divide line 36, column A, by line 36, column B) ..... • 37.               |           | %                   |
| 38 Revenue tons handled ..... • 38.   |           |                     |
| 39 MCTD percentage (divide line 38, column A, by line 38, column B) ..... • 39.               |           | %                   |
| 40 Originating revenue ..... • 40.  |           |                     |
| 41 MCTD percentage (divide line 40, column A, by line 40, column B) ..... • 41.               |           | %                   |
| 42 Total (add lines 37, 39, and 41) ..... 42.   |           | %                   |
| 43 MCTD allocation percentage (divide line 42 by three; enter here and on line 2) ..... • 43. |           | %                   |

## Schedule A, Part 3 – Computation of MCTD allocation for trucking and railroad corporations (see instructions)

- |  | A<br>MCTD | B<br>New York State |
|--|-----------|---------------------|
| 44 Revenue miles ..... • 44.   |           |                     |
| 45 MCTD allocation percentage (divide line 44, column A, by line 44, column B; enter here and on line 2) ..... • 45. |           | %                   |

## Composition of prepayments claimed on line 7 (see instructions)

- |  | Date paid | Amount |
|--|-----------|--------|
| 46 Mandatory first installment ..... 46.   | 10-15-08  | 0.     |
| 47a Second installment from Form CT-400 ..... 47a.   |           |        |
| 47b Third installment from Form CT-400 ..... 47b.  |           |        |
| 47c Fourth installment from Form CT-400 ..... 47c.   |           |        |
| 48 Payment with extension request from Form CT-5, line 10, or Form CT-5.3, line 13 ..... 48. |           |        |
| 49 Overpayment credited from prior years ..... 49.   |           |        |
| 50 Add lines 46 through 49 ..... 50.   |           | 0.     |
| 51 Overpayment credited from Form CT- ..... Period ..... 51.                                 |           |        |
| 52 Total prepayments (add lines 50 and 51; enter here and on line 7) ..... 52.               |           | 0.     |

Third-party designee (see instrs) Yes No

Designee's name

Designee's e-mail address

Designee's phone number

PIN

Certification: I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Authorized person

Signature of authorized person

E-mail address of authorized person

Firm's name (or yours if self-employed)

ACCU BUSINESS CONSULTANTS INC.

Signature of individual preparing this return

Official title PRESIDENT

Date

ID number 11-3355161

Address

1270 BROADWAY SUITE 908

City

NEW YORK

State NY ZIP code 10001-3223 Date 10-14-09

E-mail address of individual preparing this return accu@accubusiness.com

See instructions for where to file.

NYCA0912 11/07/08

43902081030



NYC  
4S

For CALENDAR YEAR 2008 or FISCAL YEAR beginning 08-01 2008 and ending 07-31-2009

Check box if you are filing a 52-53-week taxable year

☐ Amended return ☐ Final return  
☐ Check box if the corporation has ceased operations.

☐ Special short period return (see instructions)

☐ Check box if a pro-forma federal return is attached

Print or Type:

☐ Check box if you claim any 9/11/01-related federal tax benefits (see instructions)

Name <b>SWEET N SOUR 1167 CORP.</b>			EMPLOYER IDENTIFICATION NUMBER <b>20-1609385</b>
Address (number and street) <b>1167 2ND AVENUE</b>			
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10021</b>	
Business Telephone Number <b>212-308-0618</b>	Date business began in NYC <b>01-01-2005</b>	Date business ended in NYC	
			BUSINESS CODE NUMBER AS PER FEDERAL RETURN <b>445292</b>

**SCHEDULE A Computation of Tax** BEGIN WITH SCHS B - E ON PAGE 2. TRANSFER APPLICABLE AMOUNTS TO SCH A.

A Payment		Pay amount shown on line 15 -- Make check payable to: NYC Department of Finance	Payment Enclosed
1	Net income (from Schedule B, line 8)	1. -28676	0
2a	Total capital (from Schedule C, line 7) (see instructions)	2a. 13955	21
2b	Total capital -- Cooperative Housing Corps (see instructions)	2b.	
2c	Cooperatives -- enter: <input checked="" type="checkbox"/> BORO <input type="checkbox"/> BLOCK <input type="checkbox"/> LOT		
3a	Compensation of stockholders (from Schedule D, line 1)	3a. 15900	
3b	Alternative tax (see instructions)	3b.	
4	Minimum tax -- No reduction is permitted for a period of less than 12 months	4.	300 00
5	Tax (line 1, 2a, 2b, 3b or 4, whichever is largest)	5.	300
6	First installment of estimated tax for period following that covered by this return:		
a	If application for extension has been filed, enter amount from line 2 of Form NYC-EXT	6a.	
b	If application for extension has not been filed and line 5 exceeds \$1,000, enter 25% of line 5 (see instructions)	6b.	
7	Total before prepayments (add lines 5 and 6a or 6b)	7.	300
8	Prepayments (from Prepayments Schedule, line F) (see instructions)	8.	384
9	Balance due (line 7 less line 8)	9.	
10	Overpayment (line 8 less line 7)	10.	84
11a	Interest (see instructions)	11a.	
11b	Additional charges (see instructions)	11b.	
11c	Penalty for underpayment of estimated tax (attach Form NYC-222)	11c. 0	
12	Total of lines 11a, 11b and 11c	12.	0
13	Net overpayment (line 10 less line 12)	13.	84
14	Amount of line 13 to be: (a) Refunded	14a.	
	(b) Credited to 2009 estimated tax	14b.	84
15	TOTAL REMITTANCE DUE (see instructions) Enter payment amount on line A above	15.	
16	NYC rent deducted on federal return (see instr.) THIS LINE MUST BE COMPLETED	16. 95664	
17	Federal return filed: <input checked="" type="checkbox"/> 1120 <input type="checkbox"/> 1120C <input type="checkbox"/> 1120S <input type="checkbox"/> 1120F <input type="checkbox"/> 1120H		
18	Gross receipts or sales from federal return	18.	224331
19	Total assets from federal return	19.	79831

**CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION**

I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge &amp; belief, true, correct &amp; complete.

I authorize the Department of Finance to discuss this return with the preparer listed below. (see instructions) YES

SIGN HERE:	Signature of officer	Title	PRESIDENT	Date	Preparer's SSN or PTIN
PREPARER'S USE ONLY	Preparer's signature	Preparer's printed name	Check <input checked="" type="checkbox"/> if self-employed	Date	10-14-09
	ACCU BUSINESS CONSULTANTS INC.				P00380474
	1270 BROADWAY SUITE 908				Firm's Employer ID No.
	NEW YORK	NY	10001-3223		11-3355161
	Firm's name (or yours, if self-employed)	Address	ZIP Code		

Attach copy of all pages of your federal tax return or pro forma federal tax return.

Make remittance payable to the order of NYC DEPARTMENT OF FINANCE. Payment must be made in U.S. dollars, drawn on a U.S. bank.

To receive proper credit, you must enter your correct Employer Identification Number on your tax return and remittance.

**SCHEDULE B Computation of NYC Taxable Net Income**

1	Federal taxable income before net operating loss deduction and special deductions (see instructions)	1.	-29064
2	Interest on federal, state, municipal and other obligations not included in line 1	2.	
3a	NYS Franchise Tax and other income taxes, including MTA surcharge, deducted on federal return (see instructions)	3a.	88
3b	NYC General Corporation Tax deducted on federal return (see instructions)	3b.	300
4	ACRS depreciation and/or adjustment (attach Form NYC-399 or NYC-399Z) (see instructions)	4.	
5	Total (sum of lines 1 through 4)	5.	-28676
6a	New York City net operating loss deduction (see instructions)	6a.	
6b	Depreciation and/or adjustment calculated under pre-ACRS or pre-9/11/01 rules (attach Form NYC-399 and/or NYC-399Z) (see instructions)	6b.	
6c	NYC and NYS tax refunds included in Schedule B, line 1 (see instructions)	6c.	
7	Total (sum of lines 6a through 6c)	7.	
8	Taxable net income (line 5 less line 7) (enter on page 1, Schedule A, line 1) (see instructions)	8.	-28676

S CORPORATIONS  
see instructions  
for line 1

**SCHEDULE C Total Capital**

Basis used to determine average value in column C. Check one. (Attach detailed schedule)

☒ - Annually    ☐ - Semi-annually    ☐ - Quarterly  
☐ - Monthly    ☐ - Weekly    ☐ - Daily

	COLUMN A Beginning of Year	COLUMN B End of Year	COLUMN C Average Value
1 Total assets from federal return	87360	79831	83596
2 Real property and marketable securities included in line 1			
3 Subtract line 2 from line 1			83596
4 Real property and marketable securities at fair market value			
5 Adjusted total assets (add lines 3 and 4)			83596
6 Total liabilities (see instructions)	58703	80578	69641
7 Total capital (column C, line 5 less column C, line 6) (enter on page 1, Schedule A, line 2a or 2b) (see instructions)			13955

**SCHEDULE D Certain Stockholders**

Include all stockholders owning in excess of 5% of taxpayer's issued capital stock who received any compensation, including commissions.

Name and Address Give actual residence (Attach rider if necessary)	Social Security Number	Official Title	Salary and All Other Compensation Received from Corporation (if none, enter "0")
ABDUL RASHID	129-80-7356	PRESIDENT	15900
1 Total, including any amount on rider (enter on page 1, Schedule A, line 3a)			15900

**SCHEDULE E The following information must be entered for this return to be complete.**

- 1 New York City principal business activity **RETAIL NUTS & CANDY**
- 2 Does the corporation have an interest in real property located in New York City? (see instructions) ☐ YES ☒ NO
- 3 If "YES": a Attach a schedule of such property, including street address, borough, block and lot number.
- b Was a controlling economic interest in this corporation (i.e. 50% or more of stock ownership) transferred during the tax year? ☐ YES ☒ NO
- 4 Does the corporation have one or more qualified subchapter s subsidiaries (QSSS)? ☐ YES ☒ NO
- If "YES" Attach a schedule showing the name, address and EIN, if any, of each QSSS and indicate whether the QSSS filed or was required to file a City business income tax return. See instructions.

**COMPOSITION OF PREPAYMENTS SCHEDULE**

PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 8	DATE	AMOUNT
A Mandatory first installment paid with preceding year's tax		0
B Payment with Declaration, Form NYC-400 (1)		
C Payment with Notice of Estimated Tax Due, (2)		
Payment with Notice of Estimated Tax Due (3)		
D Payment with extension, Form NYC-EXT		
E Overpayment from preceding year credited to this year		384
F TOTAL of A, B, C, D, E (enter on Schedule A, line 8)		384

<b>MAILING INSTRUCTIONS</b>	<b>RETURNS WITH REMITTANCES</b> NYC DEPARTMENT OF FINANCE GENERAL CORPORATION TAX PO BOX 5040 KINGSTON, NY 12402-5040	<b>RETURNS CLAIMING REFUNDS</b> NYC DEPARTMENT OF FINANCE GENERAL CORPORATION TAX PO BOX 5050 KINGSTON, NY 12402-5050	<b>ALL OTHER RETURNS</b> NYC DEPARTMENT OF FINANCE GENERAL CORPORATION TAX PO BOX 5060 KINGSTON, NY 12402-5060
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The due date for the calendar year 2008 return is on or before March 16, 2009.  
For fiscal years beginning in 2008, File on the 15th day of the third month after the close of fiscal year.